



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Re-Elect Joe Weedon	2. OCF Identification Number PCCSD6187052
Address 1406 C Street, NE	3. Is this report an Amendment? (Yes or No) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
City, State and Zip Code Washington, DC 20002	

4. TYPE OF REPORT: **June 10th Report**

This REPORT contains activity for: **General Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 3/11/2018 through 6/10/2018		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 0.00	
(c) Total Receipts [from Line (16)]	\$ 5,353.00	\$ 5,353.00
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 5,353.00	
7. Total Expenditures (from Line 22)	\$ 995.67	\$ 995.67
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 4,357.33	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

Mr. Joe Weedon

TYPE OR PRINT FULL NAME OF CANDIDATE

ELECTRONICALLY CERTIFIED

08/10/2018

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND EXPENDITURES
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Re-Elect Joe Weedon	REPORT COVERING THE PERIOD FROM: 3/11/2018 TO: 6/10/2018	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 5,353.00	\$ 5,353.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 5,353.00	\$ 5,353.00 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 5,353.00	\$ 5,353.00 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 995.67	\$ 995.67 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 995.67	\$ 995.67 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	5,353.00
25. SUBTOTAL (add Lines 23 and 24)	\$	5,353.00
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	995.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	4,357.33

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

1. Full Name, Mailing Address and Zip Code Danica Petroschius 608 A St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/29/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Penn Hill Group 777 6th St NW Ste 500, Washington, DC 20001		
Aggregate Year-To-date			\$ 200.00
2. Full Name, Mailing Address and Zip Code Greg Whitsell 608 A St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/29/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Cable Splicer Name and Address of Employer PEPCO 2300 Martin Luther King Jr Ave SE, Washington, DC 20020		
Aggregate Year-To-date			\$ 200.00
3. Full Name, Mailing Address and Zip Code Alex Nock 748 9th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/29/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Penn Hill Group 777 6th St NW Ste 500, Washington, DC 20001		
Aggregate Year-To-date			\$ 200.00
4. Full Name, Mailing Address and Zip Code David Pinchotti 113 15TH St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Financial Administrator Name and Address of Employer US Dept of the Air Force 1000 Defense Pentagon, Washington, DC 20301		
Aggregate Year-To-date			\$ 50.00
5. Full Name, Mailing Address and Zip Code Iris Gill 1007 Florida Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/08/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer IBG Consulting Group 1007 Florida Ave NE, Washington, DC 20002		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

		Aggregate Year-To-date		\$ 200.00
6. Full Name, Mailing Address and Zip Code Sandra Moscoso 109 13th St SE, Washington, DC 20003		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/08/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Consultant Name and Address of Employer Self 109 13th St SE, Washington, DC 20003		
		Aggregate Year-To-date		
7. Full Name, Mailing Address and Zip Code Matt Frumin 4709 Albemarle St NW, Washington, DC 20016		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/08/2018 Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Steptoe & Johnson 1330 Connecticut Ave NW, Washington, DC 20036		
		Aggregate Year-To-date		
8. Full Name, Mailing Address and Zip Code Christine Clapp 326 11th St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/08/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation consultant Name and Address of Employer Spoken with Authority 326 11th St NE, Washington, DC 20002		
		Aggregate Year-To-date		
9. Full Name, Mailing Address and Zip Code John Stone 4600 Connecticut Ave NW, Washington, DC 20008		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/10/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Retired Name and Address of Employer Retired		
		Aggregate Year-To-date		
10. Full Name, Mailing Address and Zip Code Elsa Huxley 315 13th St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/18/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation realtor Name and Address of Employer Coldwell Banker 605 Pennsylvania Ave SE, Washington, DC 20003		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

		Aggregate Year-To-date		\$ 50.00
11. Full Name, Mailing Address and Zip Code Jennifer Allen 3557 Holmead Pl NW, Washington, DC 20010		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/18/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Teacher Name and Address of Employer DCPS 1200 1st St NE, Washington, DC 20002		
		Aggregate Year-To-date		
12. Full Name, Mailing Address and Zip Code Cathy Reilly 1340 Ingraham St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/18/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation teacher Name and Address of Employer St. Paul's Nursery School 3600 Ellicott St NW, Washington, DC 20008		
		Aggregate Year-To-date		
13. Full Name, Mailing Address and Zip Code Elizabeth Festa 1367 A St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/18/2018 Amount of Each Receipt This Period \$ 38.00
Contributor Type Individual		Occupation Writer Name and Address of Employer N/A		
		Aggregate Year-To-date		
14. Full Name, Mailing Address and Zip Code Tim Finklea 1108 E St SE, Washington, DC 20003		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/18/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Education Name and Address of Employer Self-Employed		
		Aggregate Year-To-date		
15. Full Name, Mailing Address and Zip Code Heather Bonome 203 12th St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 05/19/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Director, Pharmacy Accreditation Name and Address of Employer URAC 1220 L St NW Ste 400, Washington, DC 20005		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

		Aggregate Year-To-date		\$ 50.00
16. Full Name, Mailing Address and Zip Code Katherine Gensler 1350 Emerald St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/20/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Government Affairs Name and Address of Employer Solar Energy Industries Association 600 14th St NW Ste 400, Washington, DC 20005			
		Aggregate Year-To-date		\$ 100.00
17. Full Name, Mailing Address and Zip Code Heather Schoell 1418 N Carolina Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/21/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation real estate agent Name and Address of Employer self-employed			
		Aggregate Year-To-date		\$ 200.00
18. Full Name, Mailing Address and Zip Code David Treat 1730 D St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/21/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Engineering Consultant Name and Address of Employer Booz Allen Hamilton 901 15th St NW, Washington, DC 20005			
		Aggregate Year-To-date		\$ 100.00
19. Full Name, Mailing Address and Zip Code Laura Hill 5719 E Claire Dr, Scottsdale, AZ 85254	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/29/2018	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation N/A Name and Address of Employer N/A			
		Aggregate Year-To-date		\$ 20.00
20. Full Name, Mailing Address and Zip Code Lori Hamilton 1036 6th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2018	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Interpretive Planning Name and Address of Employer Gallagher & Associates 8665 Georgia Ave, Silver Spring, MD 20910			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

	Aggregate Year-To-date		\$ 25.00
21. Full Name, Mailing Address and Zip Code Erika Hoppes 516 Constitution Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Trial Attorney Name and Address of Employer Federal Government 409 3rd St SW, Washington, DC 20024		
	Aggregate Year-To-date		\$ 100.00
22. Full Name, Mailing Address and Zip Code Sameena Kluck 618 G St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Strategic Account Executive Name and Address of Employer Thomson Reuters 1333 H St NW # 700, Washington, DC 20005		
	Aggregate Year-To-date		\$ 100.00
23. Full Name, Mailing Address and Zip Code Katy Thomas 1248 E St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/31/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation mom Name and Address of Employer n/a		
	Aggregate Year-To-date		\$ 50.00
24. Full Name, Mailing Address and Zip Code Beth Bacon 418 7th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/31/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Communications Consultant Name and Address of Employer Self		
	Aggregate Year-To-date		\$ 40.00
25. Full Name, Mailing Address and Zip Code Joel Spangenberg 636 A St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2018	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Governmental Affairs Name and Address of Employer National Nuclear Security Administration 1000 Independence Ave SW, Washington, DC 20585		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

		Aggregate Year-To-date		\$ 20.00
26. Full Name, Mailing Address and Zip Code Kate Benedict 332 13th St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/01/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Criminal Investigator Name and Address of Employer US Dept of Justice 950 Pennsylvania Ave NW, Washington, DC 20530		
		Aggregate Year-To-date		\$ 50.00
27. Full Name, Mailing Address and Zip Code Sara Burns 440 10th St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/03/2018 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Listing Coordinator Name and Address of Employer Fulcrum Properties Group 1328 G St SE, Washington, DC 20003		
		Aggregate Year-To-date		\$ 25.00
28. Full Name, Mailing Address and Zip Code Gary Ratner 8209 Hamilton Spring Ct, Bethesda, MD 20817		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/03/2018 Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual		Occupation Non Profit Exec, Advocate Name and Address of Employer Citizens for Effective Schools 8209 Hamilton Spring Ct, Bethesda, MD 20817		
		Aggregate Year-To-date		\$ 75.00
29. Full Name, Mailing Address and Zip Code Frank Nickerson 1242 G St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/03/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Web Development Name and Address of Employer self employed		
		Aggregate Year-To-date		\$ 50.00
30. Full Name, Mailing Address and Zip Code Suzanne Wells 1339 E Capitol St SE, Washington, DC 20003		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/03/2018 Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual		Occupation Retired Name and Address of Employer Retired		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

	Aggregate Year-To-date		\$ 200.00
31. Full Name, Mailing Address and Zip Code K. Coney 5565 Seminary Rd, Falls Church, VA 22041	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Educator Name and Address of Employer N/A		
	Aggregate Year-To-date		\$ 20.00
32. Full Name, Mailing Address and Zip Code Ayako Sato 1528 10th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Regulatory Counsel Name and Address of Employer U.S. Food and Drug Administration 57 New Hampshire Ave, Silver Spring, MD 20993		
	Aggregate Year-To-date		\$ 200.00
33. Full Name, Mailing Address and Zip Code George Blackmon 529 Peabody St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/05/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Clerk Name and Address of Employer Democracy FCU 400 N Columbus St Ste 300, Alexandria, VA 22314		
	Aggregate Year-To-date		\$ 25.00
34. Full Name, Mailing Address and Zip Code Denise Forte 1722 E ST SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/05/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Senior Fellow Name and Address of Employer The Century Foundation 2040 S St NW Fl 2, Washington, DC 20009		
	Aggregate Year-To-date		\$ 200.00
35. Full Name, Mailing Address and Zip Code Erin Roth 636 S Carolina Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/06/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Education policy analyst Name and Address of Employer CAP 1333 H St NW, Washington, DC 20005		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

	Aggregate Year-To-date			\$ 200.00
36. Full Name, Mailing Address and Zip Code Cedric Thompson 1520 A St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Education Administration Name and Address of Employer Self-Employed			
	Aggregate Year-To-date			\$ 200.00
37. Full Name, Mailing Address and Zip Code Elizabeth Poos 911 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Small Business Owner / Yoga Teacher Name and Address of Employer Realignment Studio LLC 641 Pennsylvania Ave SE, Washington, DC 20003			
	Aggregate Year-To-date			\$ 25.00
38. Full Name, Mailing Address and Zip Code David Dougherty 343 Tennessee Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation consultant Name and Address of Employer self-employed			
	Aggregate Year-To-date			\$ 200.00
39. Full Name, Mailing Address and Zip Code Kenyon Weaver 1320 N Carolina Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Attorney-Advisor Name and Address of Employer US Department of Commerce 1401 Constitution Ave NW, Washington, DC 20230			
	Aggregate Year-To-date			\$ 20.00
40. Full Name, Mailing Address and Zip Code Eizabeth Herron 118 13th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 40.00	
Contributor Type Individual	Occupation Vice President Name and Address of Employer CARS 500 Century Park S, Birmingham, AL 35226			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

		Aggregate Year-To-date		\$ 40.00
41. Full Name, Mailing Address and Zip Code Shauna Steele 1314 Massachusetts Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation lawyer Name and Address of Employer Ernst & Young 1101 New York Ave NW # 30, Washington, DC 20005			
		Aggregate Year-To-date		\$ 100.00
42. Full Name, Mailing Address and Zip Code Ben Powell 1314 Massachusetts Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Ceo Name and Address of Employer Agora Partnerships 80 M St SE, Washington, DC 20003			
		Aggregate Year-To-date		\$ 200.00
43. Full Name, Mailing Address and Zip Code Terry Washington 338 14th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation N/A Name and Address of Employer N/A			
		Aggregate Year-To-date		\$ 50.00
44. Full Name, Mailing Address and Zip Code Tim Finklea 1108 E St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Education Name and Address of Employer Self Employed			
		Aggregate Year-To-date		\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

45. Full Name, Mailing Address and Zip Code Rebecca Wolf 322 M St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Ed researcher Name and Address of Employer Johns Hopkins University 300 E Joppa Rd, Baltimore, MD 21286		
Aggregate Year-To-date		\$ 50.00	
46. Full Name, Mailing Address and Zip Code Helena Smolich 523 2nd St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation COO Name and Address of Employer Self Employed		
Aggregate Year-To-date		\$ 20.00	
47. Full Name, Mailing Address and Zip Code Maryam Nock 748 9th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation N/A Name and Address of Employer N/A		
Aggregate Year-To-date		\$ 200.00	
48. Full Name, Mailing Address and Zip Code Sandra Moscoso 109 13th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self		
Aggregate Year-To-date		\$ 100.00	
49. Full Name, Mailing Address and Zip Code Ian Coleman 216 11th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Software Developer Name and Address of Employer Tactical Edge, LLC 2820 Camino del Rio S, San Diego, CA 92108		
Aggregate Year-To-date		\$ 100.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

50. Full Name, Mailing Address and Zip Code Laurence Gill 1007 Florida Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Project Manager Name and Address of Employer US Dept of Agriculture 1280 Maryland Ave SW, Washington, DC 20250		
Aggregate Year-To-date			\$ 200.00
51. Full Name, Mailing Address and Zip Code Samantha Caruth 1002 K St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Sidwell Friends School 3825 Wisconsin Ave NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 50.00
52. Full Name, Mailing Address and Zip Code Julie Scofield 550 14th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation N/A Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 50.00
53. Full Name, Mailing Address and Zip Code Aissa Canchola 70 I St SE Apt 110, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/10/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Penn Hill Group 777 6th St NW Ste 500, Washington, DC 20001		
Aggregate Year-To-date			\$ 50.00
54. Full Name, Mailing Address and Zip Code Grace Hu 355 I St SW # S401, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/10/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Program Examiner Name and Address of Employer Federal Government 725 17th St NW, Washington, DC 20503		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

55. Full Name, Mailing Address and Zip Code Lucy Rojansky 735 3rd St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/10/2018	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Homemaker Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 10.00
56. Full Name, Mailing Address and Zip Code Zandria Marcuson 1221 Massachusetts Ave NW, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/10/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Executive Assistant Name and Address of Employer EngenderHealth 505 9th St NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 50.00
57. Full Name, Mailing Address and Zip Code Fritz Mulhauser 319 7th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/10/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation retired attorney Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 100.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 5,353.00

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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Joe Weedon

1. Full Name, Mailing Address and Zip Code Go Daddy 14455 North Hayden Road, Scottsdale, AZ 85260	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 04/30/2018	Amount of Each Expenditure This Period \$ 35.34
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/30/2018	Amount of Each Expenditure This Period \$ 18.30
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/01/2018	Amount of Each Expenditure This Period \$ 1.75
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Staples 3301 Jefferson Davis Hwy, Alexandria, VA 22314	Purpose of Expenditure Supplies	Date (month, day, year) 05/07/2018	Amount of Each Expenditure This Period \$ 78.94
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/08/2018	Amount of Each Expenditure This Period \$ 17.15
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Uprinting 8000 Haskell Ave, Van Nuys, CA 91406	Purpose of Expenditure Campaign Materials	Date (month, day, year) 05/16/2018	Amount of Each Expenditure This Period \$ 236.29
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/20/2018	Amount of Each Expenditure This Period \$ 5.25
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/21/2018	Amount of Each Expenditure This Period \$ 17.40
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/29/2018	Amount of Each Expenditure This Period \$ 0.88
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Google 1600 Amphitheatre Pwk, Mountain View, CA 94043	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 5.41
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/02/2018	Amount of Each Expenditure This Period \$ 9.18
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/03/2018	Amount of Each Expenditure This Period \$ 4.09
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Stacey Moses 9200 Edwards Way #1110, Hyattsville, MD 20783	Purpose of Expenditure Campaign Materials	Date (month, day, year) 06/04/2018	Amount of Each Expenditure This Period \$ 100.00
Occupation Designer	Name and Address of Employer MerrickTowle Communications 7474 Greenway Center Dr Suite 910, Greenbelt, MD 20770		
14. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/04/2018	Amount of Each Expenditure This Period \$ 1.03
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/05/2018	Amount of Each Expenditure This Period \$ 14.11
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/06/2018	Amount of Each Expenditure This Period \$ 6.10
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code ooShirts 64 Shattuck Square #285, Berkeley, CA 94704	Purpose of Expenditure Campaign Materials	Date (month, day, year) 06/08/2018	Amount of Each Expenditure This Period \$ 355.72
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code Uprinting 8000 Haskell Ave, Van Nuys, CA 91406	Purpose of Expenditure Campaign Materials	Date (month, day, year) 06/08/2018	Amount of Each Expenditure This Period \$ 87.70
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code Stripe 185 Berry Street #550, San Francisco, CA 94107	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/09/2018	Amount of Each Expenditure This Period \$ 1.03
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 995.67